

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee			FEC IDENTIFICATION NUMBER ▼ C C00000935		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee Shorr Holding Company Shorr Johnson Magnus Date of Dissemination: 10/18/14			Date of Public Distribution/Dissemination 10 / 18 / 2014		
Mailing Address 100 N 20th Street Suite 201			Amount 7159.85		
City Philadelphia State PA Zip Code 19103		Transaction ID : SE-928956 Date of Disbursement or Obligation 10 / 17 / 2014			
Purpose of Expenditure Media Production		Category/Type 004		Name of Federal Candidate Rodney Leland Blum	
Calendar Year-To-Date Per Election for Office Sought		111591.80		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2014 <input type="checkbox"/> Other (specify) ▶			
Full Name of Payee Great American Media Date of Dissemination: 10/18/14			Date of Public Distribution/Dissemination 10 / 18 / 2014		
Mailing Address 3050 K Street, NW Suite 100			Amount 23440.73		
City Washington State DC Zip Code 20007		Transaction ID : SE-928955 Date of Disbursement or Obligation 10 / 17 / 2014			
Purpose of Expenditure Media Buy		Category/Type 004		Name of Federal Candidate John M. Katko	
Calendar Year-To-Date Per Election for Office Sought		1046203.16		Office Sought: <input checked="" type="checkbox"/> House District: 24 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2014 <input type="checkbox"/> Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			30600.58		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Kelly C. Ward</u>			[Electronically Filed]		Date 10 / 18 / 2014

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Great American Media Date of Dissemination: 10/18/14		Date of Public Distribution/Dissemination 10 / 18 / 2014	
Mailing Address 3050 K Street, NW Suite 100		Amount 104431.95	
City Washington	State DC	Zip Code 20007	Transaction ID : SE-928953
Purpose of Expenditure Media Buy	Category/ Type 004	Date of Disbursement or Obligation 10 / 17 / 2014	
Name of Federal Candidate Rodney Leland Blum		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 111591.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	104431.95
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	135032.53

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kelly C. Ward

[Electronically Filed]

Date

10 / 18 / 2014

Signature